

S/N: TBA

3/2/2004

Docket No.: KAW-316-USAP

22858 U.S. PTO
10/790097

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: TO BE ASSIGNED

Confirmation No.: TO BE ASSIGNED

Applicant: Kengo TAKEDA

Art Unit: TO BE ASSIGNED

Filed: March 2, 2004

Examiner: TO BE ASSIGNED

Docket No: KAW-316-USAP

Customer No: 28892

For: Wireless Communication Terminal Unit, Gaming Machine,
Information Managing Apparatus and Gaming SystemUTILITY PATENT APPLICATION TRANSMITTALIN ACCORDANCE WITH 37 CFR §1.53 (b)US Patent & Trademark Office
2011 South Clark Place
Customer Window, Mail Stop: PATENT APPLICATION
Crystal Plaza Two, Lobby, Room 1B03
Arlington, VA 22202

Sir:

This application is a:

☒ New Application.☐ Continuation☐ Divisional of U.S.P.T.O. Serial Number _____, filed
_____.☐ Continuation in Part of U.S.P.T.O. Serial Number _____,
filed _____.

The undersigned has been authorized by the Applicant(s),

Kengo TAKEDA

FOR: Wireless Communication Terminal Unit, Gaming Machine,
Information Managing Apparatus and Gaming Systemto file the attached specification and required drawings. Please
assign a serial number and accord a filing date to this prospective
application.

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Enclosed are:

62 pages of Specification,

8 pages of Claims,

1 page of an Abstract, and

31 sheets of Drawings. Total pages in the disclosure are 102.

X Return Receipt Postcard (MPEP 503).

___ Newly executed original Oath or Declaration with Power of Attorney

___ Signed Statement deleting inventor(s) named in prior application.

___ Applicant claims Small Entity status under 37 CFR §1.27.

___ Assignment of the Invention and check for \$40.00.

X A certified copy of Priority Documents.

___ A Preliminary Amendment.

___ Letter to the Official Draftsperson and amended drawing(s).

___ An Information Disclosure Statement (IDS)/PTO Form 1449.

___ The basic filing fee of \$770.00.

X The fees for the claims to be calculated as follows:

Claims Presented		Less Entitlement		Additional Fees			
				Small Entity		Large Entity	
Total	36	Minus	20	x \$9=	0.00	x \$18=	288.00
Indep.	10	Minus	3	x \$43=	0.00	x \$86=	602.00
New Multiple Dependent Claims		-0-		x\$145=	0.00	x\$290=	0.00
And Claims Dependent Thereon		-0-		x\$145=	0.00	x\$290=	0.00
TOTAL ADDITIONAL FEE				0.00		890.00	

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___ A check in the total amount of \$_____ is enclosed to cover filing fee, Recordation of Assignment fee, and excess claims fee.

X The Commissioner is hereby authorized to charge to my Deposit Account No. 19-2816 any fees required under any of 37 CFR §§1.16 to 1.17 at any time during the pendency of this application, except for the filing fees associated with this transmittal.



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Attorney of Record
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Date: March 2, 2004

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